

# Functioning of a patient with a chronic disease

( Funkcjonowanie pacjenta z chorobą przewlekłą )

K Czerwińska-Mazur<sup>1,A,D</sup>, M Kulesa-Mrowiecka<sup>1,F</sup>, Z Kopański<sup>1,C,E</sup>, J Tabak<sup>2,B,C</sup>,  
M Mazurek<sup>2,B</sup>

**Abstract** – The diagnosis of chronic disease is associated with major changes and carries many challenges in human life. Diagnosis and treatment is a strong stress for the patient. Functioning with a chronic disease is so difficult that due to the possibilities and own resources in the disease process, the patient faces the transformation of existing life goals. This means that a chronic disease interferes virtually in all spheres of human life. Regardless of the form and type, it results in the increase of the previous fitness limit, the occurrence of psychological stress caused by the fact of illness and treatment. The authors emphasized that Aaron Antonovsky, proved the existence of generalized immune resources, which activate man to take up the fight against difficulties. The rest of the article is devoted to these elements. Attention was also paid to the role of the family, where the disease of a family member is a challenge for the whole family system.

**Key words** - chronic disease, problems of a sick person, role of the family.

**Streszczenie** – Rozpoznanie choroby przewlekłej wiąże się w dużymi zmianami oraz niesie wiele wyzwań w życiu człowieka. Diagnoza i leczenie jest silnym stresem dla pacjenta. Funkcjonowanie z chorobą przewlekłą jest o tyle trudne, że ze względu na zmienione w procesie choroby możliwości i zasoby własne, pacjent stoi w obliczu przekształcenia dotychczasowych celów życiowych. Oznacza to, że choroba przewlekła ingeruje praktycznie we wszystkie sfery życia człowieka. Bez względu na postać i typ, skutkuje narastaniem ograniczenia dotychczasowej sprawności, wystąpieniem stresu psychologicznego spowodowanego faktem zachorowania i leczenia. Autorzy podkreślili, że Aaron Antonovsky, udowodnił istnienie uogólnionych zasobów odpornościowych, które uaktywniają człowieka do podjęcia walki z trudnościami. Tym elementom poświęcono dalszą część artykułu. Zwrócono także uwagę na rolę rodziny, gdzie choroba członka rodziny jest wyzwaniem dla całego systemu rodzinnego.

**Słowa kluczowe** - przewlekła choroba, problemy człowieka chorego, rola rodziny.

## Author Affiliations:

1. Faculty of Health Sciences, Collegium Medicum, Jagiellonian University

2. Collegium Masoviense – College of Health Sciences, Żyrardów

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- B. Gathering and listing data
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- D. Writing the article
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- F. Final approval of the article

## Correspondence to:

Prof. Zbigniew Kopański MD PhD, Faculty of Health Sciences, Collegium Medicum, Jagiellonian University, Piotra Michałowskiego 12 Str., PL- 31-126 Kraków, Poland, e-mail: zkopanski@o2.pl

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## I. IMMUNE RESISTANCE IN THE CONTEXT OF CHRONIC DISEASE

Almost always a difficult moment in life is diagnosing a disease, especially a chronic one. Diagnosis of the disease poses many challenges in human life, and treatment is a strong stress for the patient. A chronic disease interferes virtually in all spheres of human life [1]. Functioning with a chronic disease is so difficult that due to the possibilities and own resources, the patient faces the transformation of current life goals. Regardless of the form and type, it results in the increase of the previous fitness limit, the occurrence of psychological stress caused by the fact of illness and treatment. The situation of the disease causes reactions such as a sense of danger, uncertainty and helplessness, hinders the attainment of important life goals and changes the perception of one's own person. Without a

doubt, there are many reactions to the diagnosis as many patients there are. Reactions to the diagnosis depend not only on the degree of risk, but also on: education of the person affected, congenital and acquired emotional reactions, general state of the disease produced by the media and contact with other people, as well as public image of health care, lifestyle and coping with stress.

Human psyche has many resources. The important ones that are triggered during the fight with the disease include: immunity, self-acceptance, sense of effectiveness, ability to find themselves in difficult life situations and emotional intelligence, thanks to which the patient is able to express and understand his own emotions and use them in dealing with stress. [2-4]

Aaron Antonovsky, proved the existence of the fight against hardships. According to him, people with a strong sense of coherence tend to have pro-health behaviors. Immune resources can be divided according to appropriate criteria of individual properties, i.e. biological: genetic, immunological and biochemical as well as psychological, which include cognitive features, such as: individual personality traits, knowledge, intellect, sense of participation and learned coping strategies in different situations. Social and cultural features, ties and social support also have an impact on resources. These are resources that make it easier to face different stressors. All immune deficits may result from a limited number or lack of immune resources [3-6].

## II. SUPPORT OF THE FAMILY

The diagnosis of MS and the illness itself have consequences that significantly affect the quality of life not only of the sick person but also of the family. In a long-term, progressive and ever-changing disease process, social support plays a significant role. It can be assumed that the support coming from the environment improves the mood, but also health itself [2].

The concept of support is mentioned by authors from many scientific disciplines: psychologists, psychiatrists, sociologists and pedagogues. It is defined as a resource provided by interacting with other people [7]. Typically, there are three types of resources. First of all, resources understood as emotional support, i.e. care, interest and understanding for the patient's emotional state, and in particular, maintaining faith in the value of a given person. Information support is equally important, i.e. obtaining advice on understanding the problem, its cause, effects, and remedies - this is the second type of resource. The third type of help is so-called practical support. It does not provide the

possibility of obtaining physical and material help from third parties. The abovementioned support in every respect facilitates and helps a sick person to function in a society and allows for the creation of an optimal and possible way of implementing life-forms which have been modified due to illness [2,8]. The presence of important people can significantly help in overcoming stressful effects and experiences [3,9].

Family support should make it easier for a person to achieve success, maintain an internal balance and give them motivation to satisfy their needs. Social assistance can be conducive to health by eliminating the negative psychological consequences of stress. The perspective of obtaining support influences the cognitive assessment of the stressor and the ability to deal with it [7, 10].

It can be assumed that the support provided to a sick person has an impact on her health. First of all, social support acts as a brake on the effects of stress. At the time of high stress, and such is undoubtedly a disease, a person with social support will show a noticeably smaller deterioration in health compared to people who have not received any support. Another approach is that social support is triggered independently of the stressful situation [7, 10, 11].

The family is an integral whole. An event that affects the functioning of the family. Conversely, the functioning of health and its individual members. The family, which is a natural and continuous system, is exposed to various damaging factors. The disease can be the cause of creating abnormal interactions between family members. In the system, members interact with each other. The house that creates the family is an open system. These interactions are characterized by complementarity, repeatability and durability. Salvador Minuchin argues that patterns of interaction depend on coercive systems: general, governing the families of. It is an authority for each other. These systems serve to support the family. Any changes occurring in the external or internal environment require adaptation. The system should change to specific limits, so that the balance is maintained. In the event of changes, the system may be damaged and transformed into a new one. It is also worth mentioning that interpersonal relations do not always have a positive effect. Sometimes the help offered instead of relieving the stressful situation contributes to the problem [2,3,11].

In difficult situations, which is undoubtedly a disease, the need for support is greater, then the impact of kindness and social support helps to reduce emotional tension and helps to solve the encountered difficulties [3,12].

### III. STRESS IN THE ASPECT OF COHERENCE OF PEOPLE WITH SM

Stress is the body's reaction resulting from the action of harmful stimuli, which are so-called stressors. Above all, stress is described in terms of specific events occurring in the environment [13]. By the term stressor we can understand everything that violates the order of functioning. The non-specific reaction of the organism arising in response to stimuli is called the general adaptation team. The team consists of three stages: the first is an alarm reaction, during which defense forces are activated, the next stage is the stage of resistance or adaptation to the stressor. The last stage is exhaustion. [2,3,7,8,10,14]

When the time of diagnosis is over, the patient enters another, completely different area of social and psychological balance. The diagnosis evokes strong emotional reactions in the patient. Every disease, regardless of its duration, triggers a stress reaction, it puts the patient and his body in need of adapting to the new situation. At the beginning there is denial, tension, fear, shock. Their intensity over time may be reduced, however, it is largely dependent on the individual and adaptation to the new situation in life. Stress can affect health by changing the way you pick up disease signals. In stressful situations, people usually assess their health in more negative categories. In the case of a chronic disease, such as multiple sclerosis, which is characterized by a progressive course leading to an increasingly limited ability and function of the body, it is referred to as progressive stress, in other words increasing. In the case of progressive disease development, a person is condemned to increasing disability. The patient observes and commemorates his losses, he realizes the impossibility of performing activities that in the past were not a limitation for him. There are problems with the basic functions of life, the person becomes more and more dependent on others, with the passage of time appears frustration, rebellion and uncertainty. [2,3,7,8,10,14-17].

Disease is a time when a person is accompanied by suffering, pain and limitations of everyday abilities, which is associated with a change of lifestyle and resignation from the fulfillment of the existing roles and forms of activity. The nature of the disease and personality traits impose the attitude to the disease, the intensity of the reaction and adaptation to the new situation. The level of knowledge and attitude of the patient plays an important role in the interpretation of the picture of the health situation and behavior

towards the disease [15]. Awareness of the disease allows you to plan your life and free yourself from the burden of uncertainty. The rate of symptom development and the overall duration of the disease have a significant impact on the reception and adaptation of the person to the situation. Usually, the reactions are strongest in the initial period of the disease. There is a sense of life threatening and uncertainty about what will happen next. Often it is also the case that the individual tries to minimize the risk resulting from the disease and thus reduces his involvement in the treatment process. Patients who, despite their mild course, become insecure and fearful, feel that they have been knocked out of their normal duties and professional abilities, require psychological help. When ailments go into a chronic condition, the person calmly and more rationally approaches the assessment of the disease. It can be concluded that the slower pace of disease progression has a more beneficial effect on the adaptation process than the rapid accumulation of symptoms. The adaptation process will be more difficult for more professionally active people who have to give up their goals and lifestyle. Adaptation often requires a change in attitudes towards life and the value system. [2,8,10,13]

### IV. INFLUENCE OF DISEASE ON THE FAMILY

Being affected by a disease is a challenge for the entire family system. The disease affects functioning as well as relations with an outside environment. Family stress is a state of tension caused by a failure to overcome obstacles in the functioning of the family, which is associated with adaptation in many areas of family life [2]. In such situations, on the one hand, the family tries to maintain homeostasis and, in order to resist the resulting changes, keep balance and to function properly, it is necessary to modify, change the organization and rules of functioning. Balance expresses itself in a strong emotional ties, a sense of economic dependence and sharing interests [2,18]. Adaptation is understood as the ability to change the family structure and changes in its functioning, and is also a basic skill conditioning adaptation to stressful situations. Dealing with stress among family members depends to a large extent on the scale of the stressful situation, the functioning and organization of the family and the mutual relations of members towards one another. [3,8]

The chronic disease, which is MS, clinical psychologists and health treat as a long-term stress, which lasts for years and proceeds according to the stages that are specific to

each other. By its nature, this type of stress is dynamic and undergoes frequent changes resulting from the transaction that occurs between the individual (the sick) and the wider environment [10,18].

If the patient has a sense of control over the course of the disease, he complies with the medical recommendations, notices the effects of treatment, then he feels the effectiveness of his own actions and at the same time has a sense of influence on the course of the disease. In the case of multiple sclerosis, when the medium is not fully understood, it is often difficult because the disease proceeds with variable and unpredictable dynamics, which results in a difficult treatment and may not provide the desired results. In addition, in the case of autoimmune diseases, the patient does not feel a great sense of influence or control over the causes and course of the disease, and thus his own life. Hence, adaptation and adaptation to the existing stressor is significantly impeded and requires many efforts on the side of the patient [10].

The size of the crisis is a component of the type and strength of the stressor, the size of changes and the tendency of the system to deal with a difficult situation. This change can take place both structurally and functionally. The modification applies, for example, to changes in roles, goals and values. In order to meet the requirements imposed by the stressful situation, the family use the material and spiritual resources at their disposal [4, 9, 10, 18].

Successful adaptation is related to the ability to compromise between the good of the family and the good of the sick person as a component of the system. The family gives up things that are less important in the care of the person affected by the disease and the preservation of the essential values created during life. At the moment when the family perceives suffering as a certain experience that can give a chance for human development, it is easier to find a place caused by the disease. In addition, faith combined with hope, gives suffering a different dimension [12,14,18].

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